

6200 Riverport Road • Henderson, Kentucky 42420 • Ohio River Mile 808 Phone (270) 826-1636 • Fax (270) 827-4523

Email: greg.pritchett@hendersonport.com • Web Site: www.hendersonport.com



August 12, 2009

Re: Surface water permit

KY0092126

To: Division of Water: Surface Water Permits Branch

Dear Mr. Cleaver

Enclosed are the forms that were sent to us to complete to finish our application for the renewal of our permit listed above.

As we spoke on the phone, I have enclosed a copy of the monthly discharge monitoring report for the month of July 2009 showing that is no discharge as we do not have a stockpile at the present time. We carry this permit for the purpose if we needed to stockpile coal we would have this in place for that. We load coal into barges on the river and we have not stockpiled coal or any other product for several years but we want to keep this in place in case the event arose that we would have to stockpile.

Thank you for your help in getting this solved so quickly.

Sincerely,

Pamela R. McCartney

Office Manager/Adm. Assistant Henderson County Riverport

Tamba P McCentres

VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount (for permit renewals, please include the KPDES permit number on the check to ensure proper crediting). Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category:	Filing Fee Enclosed:	
Non Process Inclusting	\$ 200.	

VIII, CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
Mr. & Ms. O Grea Pritchett, Ex Director	270-826-1634
SIGNATURE	DATE:
This 1 dill	7-14-09

Return completed application form and attachments to: KPDES Branch, Division of Water, Frankfort Office Park, 14 Reilly Road, Frankfort, KY 40601. Direct questions to: KPDES Branch at (502) 564-3410.

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VII. BIOLO	GICAL TOXIC	TY TESTING DATA				
		or reason to believe that a er in relation to your disc			hronic to	exicity has been made on any of your
	Yes (Identify	he test(s) and describe th	eir purposes bel	ow)	这	No (Go to Section VIII)
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VIII. CONT	RACT ANALYS	IS INFORMATION			Sign (France)	
Were any of the	e analyses reporte	d in Item V performed by	y a contract labo	ratory or consu	lting firm	1?
	Vec (list the no	me, address, and telepho	ne number of a	nd nollutants		No (Go to Section IX)
		by each such laboratory		id pondants		110 (00 to 500401121)
NA	ME	ADDRESS		TELEPHO		POLLUTANTS
			(-	Area code & n	umber)	ANALYZED (list)
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IX CERTIFIC	ATION					
						irection or supervision in accordance
						ation submitted. Based on my inquiry ring the information, the information
						hat there are significant penalties for
submitting false	information, incl	uding the possibility of f	ine and imprison	ment for know	ing viola	ations.
NAME AND O	FFICIAL TITLE	(type or print):		TELEPHO	NE NUM	IBER (area code and number):
	ritchell	(En. Aprt)	Director		- 20	26-1636
SIGNATURE	ritches	+ CH. PPITT	JITE CKUY	(DATE)		
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	1110,	1111		1	-	*

Ā,	space provide	ns before proceeding Comple ed. es V-A, V-B, and V-C are inclu-		Δ	te the outfall number in the
D.	which you know or have re	any of the pollutants (refer to S ason to believe is discharged or you believe it to be present and	may be discharged from	any outfall. For ev	ery pollutant you list,
	POLLUTANT	SOURCE	POLLUTA	ANT	SOURCE
	Iron Manganese Suspended Solids	Stock Pileo Coal	}		
VI	. POTENTIAL DISCHAR	GES NOT COVERED BY A	NALYSIS		
A.	Is any pollutant listed in Ite produce over the next 5 year	m V-C a substance or a comporurs as an immediate or final produch pollutants below)	nent of a substance which	n you use or produc	e, or expect to use or
Г					
		*			×
	D				K
В.	Are your operations such the discharge of pollutants may	at your raw materials, processes during the next 5 years exceed	s, or products can reason two times the maximum	ably be expected to values reported in	vary so that your Item V?
	Yes (Complete	e Item VI-C)	No (Go to Item VII)		
C.	If you answered "Yes" to It expected levels of such poll additional sheets if you need	em VI-B, explain below and deutants which you anticipate will more space.	scribe in detail to the bes l be discharged from eac	st of your ability at h outfall over the n	this time the sources and ext 5 years. Continue on
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V. INTAKE AND EFFLUENT CHARACTERISTICS

ADDRESS C/O RIVER & RAIL INC

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LOCATION HENDERSON

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

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DISCHARGE NUMBER

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MINOR

Form Approved. OMB No. 2040-0004

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6202 RIVERPORT RD

WINE IN

OMB No. 2040-0004

CEPEP AM KY 42420 FROM YEAR PERMIT NUMBER MO MONITORING PERIOD ي. DAY 70 YEAR MO DISCHARGE NUMBER DAY 21 CHAMMA 157 TERROR NATIONALISTS *** NO DISCHARGE NOTE: Read Instructions before completing this form.

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DAILE	5	NE	TELEPHONE	Τ		**				ments,were n system designed	I certify under penalty of law that this document and all attachments, were	er penalty of law that th	OFFICER I certify und	NAME/TITLE PRINCIPAL EXECUTIVE
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (use the same format) instead of completing these pages. (See instructions)

Part A.— You must provide the results of at least one analysis for every pollutant in this table. Co	provide the result	s of at least one a	nalysis for every p	ollutant in this tab	Part A You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.	ble for each outfall	See instructions	for additional detai	s			
				2. EFFLUENT				3. UNITS	I'S	.4.	4. INTAKE	
1. POLLUTANT	s. Maximum Daily Value	Dally Value	b. Maximum 30-Day Value (If available)	0-Day Value lable)	c. Long-Term Avg, Value (if available)	Avg, Value	d. No. of	a. Concentration	b. Mass	a. Long-Term Avg. Value	vo Valmo	,
	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	(2) Mass	No of Analyses
a. Biochemical Oxygen Demand (BOD)								4		i)		
b. Chemical Oxygen Demand (COD)									162			
c. Total Organic Carbon (TQC)									1)s		
d. Total Suspended Solids (TSS)												
e. Ammonia (as N)										S		
f. Flow (in units of MGD)	VALUE		ANTOR		AVLUE				MGD	VALUE		
g. Temperature (winter)	VALUE		BULL		VALUE			•	°c	VALUE		
h. Temperature (summer)	VALUE		ANTUE		AVTOR				°c	VALUE		
i. pH	J. O	H'S MOMIXVM	MUMINIM	MAXIMUM		101		STAN	STANDARD UNITS			

No coal stock piled to date

Part B.- In the MARK "X" column, place an "X" in the Belleved Present column for each pollutant you know or have reason to believe is present. Place an "X" in the Belleved Absent column for each pollutant you believe to be absent. If you mark the Belleved Present column for any pollutant, you must provide the results of at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

TNYLNTTOO	2. MARK "X"	K "X"			E F	3. EFFLUENT				JA.		INTAK	6,	7
AND CAS NO.	n.	۰ '۹	a. Maximum Dally Value	ily Value	b. Maximum 30-Day Value (if available)	(0-Day lable)	c. Long-Term Avg. Value (if available)	n Avg. Hable)	No. of	P	Ь,	a, Long-Term Avg Value	Avg	b. No. of
(If available)	Believed Present	Belleved Absent	(1) Concentration	(2) Mass	(1) Concentration	Mass	(1) Concentration	(2) Mass	Analyses	Concentration	Mass	(1) Concentration	Mass	Analyses
a. Bromide (24959-67-9)		\times												
b. BromineTotalResidual		×	3							×				
c. Chloride		+									i i			
d. Chlorine,Total		<												
Residual		>												
e. Color		\succ				er .								
f. Fecal Coliform		<i>*</i>												
g. Fluoride (16984-48-8)		\times												
h. Hardness (as CaCO ₃)		×				a							*	
i. Nitrate – Nitrite (as N)		×												
j. Nitrogen, Total Organic		<	(62)		(*)	30)			80			(16)		
		>												
K. Oil and Grease		×												
I. Phosphorous (as P), Total 7723-14-0		×							=					
m. Radioactivity														
(1) Alpha, Total		\times				LI I								
(2) Beta, Total		\times												
(3) Radium Total		\prec					×				8			
(4) Radium, 226, Total		\times							e e					7.

I. POLLUTANT	MARK	2. MARK "X"			EF	3. EFFLUENT				UNITS		INTAK	5. INTAKE (ontional)	0
And CAS NO.	B	ъ,	a. Maximum Dally Value	/ Value	b. Maximum 30-Day Value (if available)	0-Day able)	c. Long-Term Avg. Value (if avallable)	1 Avg.	No. of	P.	σ-	a. Long-Term Avg.	Value	b.
(If available)	Belleved Present	Belleved Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses	Concentration	Mass	(1) (2) Concentration Mass	(2) Mass	Analyses
n. Sulfate (as SO ₄) (14808-79-8)		×												
o. Sulfide (as S)		\times										6.5 6.5 7.5		
p. Sulfite (as SO ₄) (14286-46-3)	-	\times	E											
q. Surfactants		×								(t				
r. Aluminum, Total (7429-90)		×										2		
s. Barium, Total (7440-39-3)		×										2		
t. Boron, Total (7440-42-8)		×												
u. Cobalt, Total(7440-48-4)		人									,			
v. Iron, Total (7439-89-6)	X	^	See	WO.) TOBU	120	5							
w. Magnesium Total (7439-96-4)		×				C	706.5)				
x. Molybdenum Total (7439-98-7)		×	×.											*
y. Manganese, Total (7439-96-6)	×		See 0	1WO	the t	asse	5							
z. Tin, Total (7440-31-5)		×	390											
aa. Titanium, Total	i i	×												

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Part C—If you are a primary industry and this outfall contains process wastewater, refer to Table C-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in the Testing Required column for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark this column (secondary industries, nonprocess wastewater outfalls, and non-required GC/MS fractions), mark "X" in the Believed Present column for each pollutant you know or have reason to believe is present. Mark "X: in the Believed Absent column for each pollutant you believe to be absent. If you mark either the Testing Required or Believed Present columns for any pollutant, you must provide the result of at least one analysis for that pollutant. Note that there are seven pages to this part, please review each carefully. Complete one table (all seven pages) for each outfall. See instructions for additional details and requirements.

POLLUTANT and CAS NO. (If available)	a. Testing Required	2. MARK "X" a. Belleved Present	b Belleved Absent	Maximum Daily (1) Concentration		3. EFFLUEN b. Maximum 30-Day Value (if available) (1) (2) Concentration Mas	3. EFFLUENT um 30-Day available) (2) lon Mass	c. Long-Term Avg. Value (If available) (1) Concentration Ma	15-A	88	Avg. d. (ble) No. of (2) Analyses	88	d. No. of Concen) Analyses	d. No. of Concentration Analyses
METALS, CYANIDE AND TOTAL PHENOLS	NIDE AND T	COTAL PH	ENOLS)	8	S 55	Surveille House	Centar	Concentration	100	CSETAT	IVLHBS	LYANDS	L MARINE	Concentration
IM. Antimony Total)		\times											
2M. Arsenic, Total			×											
3M. Beryllium Total (7440-41-7)			×			₩								
4M. Cadmium Total (7440-43-9)	~	- 3	×			14		ā.						
SM. Chromium Total (7440-43-9)			\times		:-									
6M. Copper Total (7550-50-8)	V		×	o										
7M. Lead Total (7439-92-1)			×											
8M. Mercury Total (7439-97-6)			×	2		*								
9M. Nickel, Total (7440-02-0)			\times							*				
10M. Selenium, Total (7782-49-2)		:45	\times											
Total			\times											

Part C Continued 2. I. MARK "X"	POLLUTANT And CAS NO. a. a. a. Testing Believed	(if available) Required Present	METALS, CYANIDE AND TOTAL PHENOLS (Continued).	T2M. Thallium, Total (7440-28-0)	13M. Zinc, Total (7440-66-6)	14M. Cyanide, Total	(57-12-5)	Total	DIOXIN	2,3,7,8 Tetra- chlorodibenzo	P, Dioxin (1784-01-6)	GC/MS FRACTION - VOLATILE COMPOUNDS	1V. Acrolein (107-02-8)	V	2V. Acrylonitrile (107-13-1)	2V. Acrylonitrile (107-13-1) 3V. Benzene	2V. Acrylonitrile (107-13-1) 3V. Benzene (71-43-2)	2V. Acrylonitrile (107-13-1) 3V. Benzene (71-43-2) 5V. Bromoform (75-25-2)	2V. Acrylonitrile (107-13-1) 3V. Benzene (7143-2) 5V. Bromoform (75-25-2) 6V. Carbon Tetrachloride (56-23-5)	2V. Acrylonitrile (107-13-1) 3V. Benzene (71-43-2) 5V. Bromoform (75-25-2) 6V. Carbon Tetrachloride (56-23-5) 7V. Chloro-	2V. Acrylonitrile (107-13-1) 3V. Benzene (71-43-2) 5V. Bromoform (75-25-2) 6V. Carbon Tetrachloride (56-23-5) 7V. Chlorobenzene (108-90-7)	2V. Acrylonitrile (107-13-1) 3V. Benzene (71-43-2) 5V. Bromoform (75-25-2) 6V. Carbon Ternethoride (56-23-5) 7V. Chlorobenzene (108-90-7) 8V. Chlorodibro-	2V. Acrylonitrile (107-13-1) 3V. Benzene (71-43-2) 5V. Bromoform (75-25-2) 6V. Carbon Tetrachloride (56-23-5) 7V. Chloro- benzene (108-90-7) 8V. Chlorodibro- momethane (124-48-1)
	b. Belleved	Absent	NOLS (Con	×	×	×	>	×			×	POUNDS	メ	<	ز;	>	<	>	×>	< >>	× × ×	×××	× ××
	a. Maximum Daily Value	(1) Concentration	tinued)	×		2.				DESCRIBE RESULTS:				11								-	1.0
	Value	(2) Mass								ULTS:													
EFF	b. Maximum 30-Day Value (if available)	(1) Concentration		16.												~							
3. EFFLUENT	0-Day	(2) Mass														3:							
	c. Long-Term Avg. Value (if available)	(1) Concentration																				F4	
	Avg.	(2) Mass											b										
	N p.	Analyses																				*	
d. UNITS	a. Concentration										×											2	
	Mass																						
AATNI	a. Long-Term Avg Value	(1) Concentration			, ,																		
5. INTAKE (optional)	vg Value	(2) Mass	1										100		-								
(al)	No. of	Analyses				•		*															

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		3								(19-22-24E-500 ccs	Woolaid Well Stranger Stranger Stranger	200000000000000000000000000000000000000	Children and the Control of the Cont	Section of the last	1
I.		MARK "X"				EFF	EFFLUENT				UNITS		INTAKI	5. INTAKE (optional)	
And CAS NO.	a. Testing	a. Belleved	b. Believed	a. Maximum Daily Value	Value	b. Maximum 30-Day Value (If available)	0-Day able)	c. Long-Term Avg. Value (if available)	Avg.	N p.	a. Concentration	b. Mass	a. Long-Term Avg Value	Value	000000000000000000000000000000000000000
(if available)	Required	Present	Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	Analyses			(1) Concentration	Mass	0000000000
9V. Chloroethane (74-00-3)	*		\times												
10V. 2-Chloro- ethylvinyl Ether (110-75-8)		25	×							٠					
11V. Chloroform (67-66-3)		*	×												_
I2V. Dichloro- bromomethane (75-71-8)			×												
I4V. I,I-			<												
(75-34-3)			×												
15V. 1,2- Dichloroethane			\times												
16V. 1,1- Dichlorethylene (75-35-4)			\times												
17V. 1,2-Di- chloropropane (78-87-5)			\times												
18V. 1,3- Dichloropro- pylene			×	9		e.		÷							
19V. Ethyl-															
benzene (100-41-4)			×												
20V. Methyl Bromide (74-83-9)			\times					v.							